## SOLDIERS' AND SAILORS' CIVIL RELIEF ACT DECLARATION

То				
(Assessor's name)				
Assessor of	County			
(Annoqui's affice addition)				
(Assessor's office address)				
Name of Military Person				
Mailing address(street)				
(street)	(city)	(state)	(zip code)	
Telephone numbers ( )	( ) (work)	(e-mail address — optional)		
I hereby state:				
<ol> <li>I am a person in the Armed Forces of the (50 Appendix U.S.C.A. sections 510-590, as</li> </ol>	•	-	' Civil Relief Act	
(rank)	(social security number — last four digits only)	(organization)		
2. I am not a resident of the State of California	or County of			
		(name of county of current residence)		
and I am in this State solely by reason of co	mpliance with military orders.			
My legal residence is in the State of			at:	
	(name of state of	legal residence)		
(street address)	(city or town)	(county)		
4. I last registered to vote or voted in the year	in the City of			
County of	, State of			
5. Other than manufactured homes, I am the le	gal owner of the following personal pro	perty located in California:		
6. For manufactured homes, I am the registere	d owner of the following manufactured	home located in California:		
(manufacturer's name)	(year home manufacture	d) (decal/serial number of	manufactured home)	
YOU MUST COMPLETE AND S	SUBMIT A SEPARATE DECLARATION	N FOR EACH YEAR DECLARE	D	
YOU MUST SUBMIT A CURRE	NT LEAVE AND EARNINGS STATEM	ENT WITH THIS DECLARATIO	N	
Che	ck here if you are signing as a power o	f attorney.		
	CERTIFICATION			
I certify (or declare) under penalty of perjury including any accompanying statements or do				
SIGNATURE OF DECLARANT	<u> </u>	DATE		